

Name: Rita J. Watkins
Invoice Date: 5/31/2024
Invoice Period: May 1-31, 2024

I hereby certify that the amount billed in this invoice is true and correct in my capacity as a member of the Federal Monitoring Team. I further certify that I have not received any income, compensation, or payment for services rendered under a regular employment or contractual relationship with the Commonwealth, or any of its departments, municipalities or agencies.

Signature:

Rita J. Watkins

Date: 5/31/2024